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Wellness Fair for Seniors

Sharon Ayala, MAMC PAO

How to stay healthy during the Winter months was the main topic of discussion at the Nov. 4, Winter Wellness for Seniors program.

The event was conducted at the Fort Lewis Four Chaplains Chapel from 9 a.m. to 3:30 p.m., and was designed to provide an opportunity for Madigan Army Medical Center's senior beneficiaries to participate in health talks on common winter wellness issues.

More than 400 beneficiaries converged inside the

Chapel to take advantage of the opportunity to receive health and wellness tips, get their flu shots,



Barbara Williams takes advantage of the flu shots that were offered at the Nov. 4, Winter Wellness for Seniors event. SPC Adrian Gayman, 62nd Medical Group, is administering the flu shot. PHOTO BY SHARON D. AYALA

and receive screenings for Pneumovax and Tetanus. By the end of the day, nearly 400 beneficiaries had received flu shots.

A variety of health care

briefings were conducted throughout the day to include Senior Health Assessment; Seasonal Affective Disorder; Winter Safety Tips; Herbal Medications and many more. All sessions were filled to capacity.

Special thanks goes out to MAJ Pamela Birgenheier, Managed Care Division, the Consolidated Troop Medical Clinic Immunization Team, Pastoral Care, Nutrition Care Division, Preventive Medicine, Community Health Nursing, Unified Mental Health, Nursing Research and Foundation Health Federal Services.



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Special points of interest:

Miss the Communication and Customer Service Conference last month?

Check out the TMA conference web site at www.tricare. osd.mil.

Most of the presentations are there for viewing, including:

- ◆ TRICARE from the Media Perspective
- ◆ TRICARE From the Service Member's Perspective
- ◆ IG Assessment of TRI-CARE Marketing Program
- ◆ Marketing at the MTF Level
- ♦ Best Practices in Web Sites
- ♦ How to Make a Web Page in Just an Hour
- ♦ Customer Service by Gary



Sharon D. Ayala, MAMC PAO

BG Mack Hill, the Commander of Madigan Army Medical Center, told school officials at Evergreen Elementary, that Madigan is optimistically looking forward to expanding its role in contributing to the education of the children

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who attend Evergreen.

During the one-hour Oct. 15 visit and tour of the school, Hill and several Madigan staff were briefed of the areas that are most in need of volunteers from the medical facility.

There are approximately 500 children enrolled at Evergreen Elementary. More than 130 are special needs children and about 30 have extensive needs.

Evergreen's principal, Chris Hines, said the school would really benefit from the health care professionals' expertise on how to deal more effectively with children who have special needs and require extra attention.

Hines also suggested having monthly or quarterly meetings that would include a variety of health care professionals who could share medical information with both staff and parents.

Volunteers are still needed to

serve as tutors in math and reading. Soldiers and civilians interested in serving as volunteers at Madigan's adopted school may do so without being charged leave. In fact, soldiers are authorized up to one hour per week, and civilians up to 59 minutes per week, as long as no other excused absences during the week are approved. A single individual participation can be the basis for developing a leader of tomorrow.

In a memorandum signed by former I Corps Commander,

LTG George Crocker, he stated "The education of our children depends on the interest, involvement, and enthusiasm of volunteers. Individual participation fosters a greater

understanding between students, schools, educators and the military."

During the tour, the children in one of the kindergarten classes received a special treat when Hill offered to read a story to them.

In an effort to increase



awareness about the school liaison program, Hines will be one of the featured speakers at the Nov. 18 Community Meeting, which will be conducted in Letterman Auditorium at 3:30 p.m. Don't miss this meeting!

If you are interested in serving as a school liaison volunteer at Evergreen Elementary, please contact LTC Stephen Turner at 968-4004.

FH5 Plays in Joint Pacific Exercise

Judith Robertson, NHB PAO

In the business world it might be considered stealing corporate secrets, but at Operation Pacific Warrior, the Chief of Staff for the joint medical exercise calls it "sharing resources."

The Army's Lt. Col. Dennis Schroader, MSC, said the three-week, five-phase exercise is "about

innovating and creating new ways to solve military medical problems with limited resources by interacting with the sister services and sharing knowledge and resources."

What began as an exercise to train the medical

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FH5 Plays in Joint Pacific Exercise Cont.

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staff at Tripler Army Medical Center on Oahu, Hawaii in the construction and use of a Combat Support Hospital, blossomed into an event that tested the clinical and operational compatibility of 13 hundred Army, Navy and Air Force. Over one hundred members of Fleet Hospital Five, the expeditionary arm of Naval Hospital Bremerton, took part, including 20 Reservists.

Tasked with planning and executing the care of battlefield casualties from the point of injury (battlefield) to the eventual return to duty, or stabilization and evacuation back to the continental United States, top military medical personnel from each service recognized the benefit of training together for a common goal. "The goal is to better prepare our soldiers, sailors and airmen to function on the battlefield and take care of those who are in harms way," Schroader said. "That is our biggest challenge, to assure that the person asked to pay that price, reaps the benefit. And if we do our job well, we will be better prepared to, as the Army medical department motto says, 'conserve the fighting strength."

To assess that training, Observer Clinicians from all services watched every process. "Our job is basically to follow the patient through the process and evaluate how the care providers are doing their jobs," said Cmdr.(sel) Beth Swatzell, NC, USN, assigned from Naval Hospital Bremerton with Fleet Hospital Five. "We assess the triage technique, observe the thought processes that go into the decisions for diagnosis and treatment. If there are questionable decisions we coach them, try to turn on the light bulb for them." Care providers on the battlefield could come from a variety of disciplines, Swatzell said.

Joint services teams worked together to construct a 120-bed tent hospital, install the field equipment and connect the facility to generators,

water sources and sanitation. Training at all levels took place in preparation for the live surgeries conducted in the field facility. The volunteer, same-day elective surgical cases were kept over night to facilitate training for wa

kept over night to facilitate training for ward and food services personnel. But the biggest test was yet to come.

Realistic battlefield testing of the system had to occur. And to achieve reality, stress had to occur. That came in phase four during a 96-hour combat casualty drill that took moulaged mannequins and human "casualties" from the battlefield to one of



Cmdr.(sel.) Beth Swatzell, NC, USN, (far right) an Observer Clinician during Operation Pacific Warrior, assesses procedures used on a battlefield "casualty" by Lt. Brian McCann, NC, USN (left) and Capt. Matthew Bruner Dental Corps, USA. The exercise trained medical personnel from the Navy, Army and Air Force Nov. 6-21 in Oahu, Hawaii.

three Forward (on the front lines) Surgical Teams, from there into ambulances to be transported to the Combat Support Hospital for evaluation and care. If the patient was determined to need extensive or long-term care they were then loaded onto Army helicopters that airlifted them to Air Force planes for evacuation to large medical centers such as Tripler Army Medical Center near Honolulu or in the continental United States.

"Beginning Nov. 13 we went into 'lock-down status,' said Capt. Dana Covey, MC, USN, Task

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FH5 Plays in Joint Pacific Exercise Cont.

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Force 121 commander. "Everyone who was inside the wire (within the barbed wire perimeter) was responding to a realistic wartime scenario. We had very austere conditions, no showers, very little sleep and for the past 72-hours, shelling, insurgents, protestors, infiltrators and receipt of casualties."

Stress began early for Covey, who had expected to be in charge of the 104 Navy and one Marine involved in the exercise. But prior to the simulated hostilities, Covey found he had been appointed commander of the entire task force. This meant commanding Army, Navy, Air Force, a Marine, the medical personnel in the General Hospital, a Veterinary Surgical Unit, an ambulance company, the Sea Bees, and the three Forward Surgical Teams in other parts of Oahu.

"They (the Army) really exhibited trust in their sister service. They just turned the whole operation over to a swabby," Covey said. "That was very generous of the Army after they had been planning this for over a year."

Covey, who is the second most deployed medical officer in the Navy, was still smiling late on day three of the lock down.

"Stuff happened all night, it was worse than the first two nights. We had bombs, sirens, small arms fire, intruders, had to go to level four MOPP gear (full protective clothing including gas masks and gloves), we had injured casualties coming in all night and we lost eight our people to insurgents. Key leaders were taken out to stress the system and test the junior personnel in those positions. I escaped, with help from my staff. Our one Marine, Cpl. Jason Bain, from USMC Security Group Det. Bangor, was taken out, but he took out three insurgents before they got him."

Along with the clinical and operational training

gained during the exercise, the personnel were learning another highly valued battlefield skill -- endurance.

"People are beginning to get real tired and stressed, you see signs of interpersonal conflicts,



With an Observer Clinician (left) watching the process medical personnel from the joint services work together to unload "battlefield casualties" from a field ambulance. The teams were comprised of members of the Army, Navy and Air Force, training together during a 72-hour nonstop mass casualty drill that was part of the joint services medical exercise, Operation Pacific Warrior held on Schofield Barracks, Oahu, Hawaii Nov. 6-21.

but they're holding it together, they're getting the job done," Covey said.

The constant barrage of events was not built into the scenario for harassment, but to allow individuals and teams to assess their ability to deal with battlefield stress and fatigue as realistically as possible. Thrown into this mix was a tri-services consideration, the need to learn each other's jargon, forms and acronyms. "It's always a challenge to learn the language of the sister services, but this is part of training like you fight. Operating in a joint environment is happening more and more often. This training is very valuable. It is the closest thing we've had to operating in a real-world wartime scenario," Covey said.